

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	RUTHENIUM BASED CONTAMINANT SORBENTS AND OXIDIZERS
Attorney Docket Number::	SCHECKEL1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	13
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States
Status::	Full Capacity
Given Name::	Kirk

Middle Name::	G.
Family Name::	SCHECKEL
Name Suffix::	
City of Residence::	Cincinnati
State or Province of Residence::	Ohio
Country of Residence::	USA
Street of Mailing Address::	6649 Chaparral Court
City of Mailing Address::	Cincinnati
State or Province of Mailing Address::	Ohio
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	45233
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Christopher
Middle Name::	A.
Family Name::	IMPELLITTERI
Name Suffix::	
City of Residence::	Cincinnati
State or Province of Residence::	Ohio
Country of Residence::	USA
Street of Mailing Address::	3542 Daytona Avenue
City of Mailing Address::	Cincinnati
State or Province of Mailing Address::	Ohio
Country of Mailing Address::	USA
Postal or Zip Code of Mailing Address::	45255
Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	James
Middle Name::	A.
Family Name::	RYAN
Name Suffix::	

City of Residence:: Cincinnati  
State or Province of Residence:: Ohio  
Country of Residence:: USA  
Street of Mailing Address:: 7166 Grantham Way  
City of Mailing Address:: Cincinnati  
State or Province of Mailing Address:: Ohio  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 45230

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
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**Assignment Information**

Assignee Name:: U.S. EPA  
Street of Mailing Address:: 1200 Pennsylvania Avenue  
City of Mailing Address:: Washington  
State or Province of Mailing Address:: D.C.  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 20460